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SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not required to respond unless (6-02)the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate sta tes will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 May 31, 2005 Expires: Estimated average burden hours per response.

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

04032238						

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Limited Partnership Interests	SECENED CO
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	
Type of Filing: New Filing Amendment	11AL A 7 200A
A. BASIC IDENTIFICATION DATA	014 0 0 2001
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	107 (6)
Morrison Street Fund I, L.P.	Q 187 /S
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	
121 SW Morrison Street, Suite 200, Portland, OR 97204 (503) 273-0345	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	
(if different from Executive Offices)	
Brief Description of Business	no CFSSEU
Real Estate Equity Fund	PROCESSED JUN 1 0 2004
Type of Business Organization	/ ILIN 1 0 2004
☐ corporation ☐ limited partnership, already formed ☐ other (please specify)	IL JOIN TO
business trust limited partnership, to be formed	THOMSON
Month Year	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: 10 02 Actual Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE	
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Form D Page 1 of 8 ::ODMA\PCDOCS\PORTLAND\425446\4

A. BASIC IDENTIFICATION DATA							
2. Enter the information requested for the following:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;							
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 							
Each general and managing partner of partnership issuers.							
Check Box(es) that Apply: \square Promoter \boxtimes Beneficial Owner \square Executive Officer \square Director \boxtimes General and/or Managing Partner							
Full Name (Last name first, if individual)							
NBS Funding, LLC, an Oregon limited liability company							
Business or Residence Address (Number and Street, City, State, Zip Code)							
121 SW Morrison Street, Suite 200, Portland, OR 97204							
Check Box(es) that Apply: A Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Gregory, Rance S.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
121 SW Morrison Street, Suite 200, Portland, OR 97204							
Check Box(es) that Apply: 🛛 Promoter 🔂 Beneficial Owner 🔲 Executive Officer 🔲 Director 🔯 General and/or Managing Partner							
Full Name (Last name first, if individual)							
Hering, J. Clayton							
Business or Residence Address (Number and Street, City, State, Zip Code)							
121 SW Morrison Street, Suite 200, Portland, OR 97204							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply:							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)							

Form D

B. INFORMATION ABOUT OFFERING													
1.							Yes	No					
2.	**						\$ <u>500,000*</u>						
*Stated minimum with right reserved to accept lesser investment amounts							-						
3.	Does	the offerin	g permit joir	nt ownership	of a single u	.nit?						Yes ⊠	No
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. None												
Full	Name	(Last name	e first, if ind	ividual)									
Bus	iness or	Residence	e Address		(Number	and Street,	City, State, 2	Zip Code)	<u> </u>	•			
Nam	ne of As	sociated Br	roker or Deal	er									
State	es in W	uch Person	Listed Has S	Solicited or In	tends to Solid	cit Purchasers	S						
				ndividual Stat		ll States					_		
		☐ AK	□ AZ	☐ AR	□ CA		СТ	DE	□ DC	☐ FL	☐ GA	∏н	
		☐ IN	□ IA □ NV	☐ KS ☐ NH	∏ KY ∏ NJ	☐ LA ☐ NM	☐ ME ☐ NY	☐ MD	☐ MA ☐ ND	□ мі □ он	☐ MN ☐ OK	☐ MS ☐ OR	∐ MO □ PA
		□ sc	□ SD		☐ TX	UT	TV 🗆	□ VA	□WA		□wi	□ WY	☐ PR
			e first, if ind										
Bus	iness or	Residence	e Address		(Number	r and Street,	City, State, 2	Zip Code)					
Nam	ne of As	sociated Br	roker or Deal	er	· · · · · ·			<u> </u>					
State	es in W	nich Person	Listed Has S	Solicited or In	tends to Soli	cit Purchaser	<u> </u>					4.00	
	,	k "All State	es" or check i	ndividual Stat		ll States	_						
		☐ AK	□ AZ	☐ AR	CA	\square ∞	□ст	☐ DE	DC	☐ FL	☐ GA	Πн	
			□ IA	□ KS	☐ KY	□ LA	☐ ME	☐ MD	☐ MA	□ мі	☐ MN	☐ MS	□мо
		□ NE □ SC	□ NV □ SD	□ NH □ TN	∏ ил ДТХ	☐ NM ☐ UT	□ NY □ VT	□ NC □ VA	□ ND □ WA	□ oн	□ ok □ wi	□ OR □ WY	□ PA □ PR
RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
		☐ AK	□ AZ	☐ AR	CA	□ co	СТ	☐ DE		FL	☐ GA	ΗΙ	□ ID
		☐ IN ☐ NE	□ IA □ NV	□ KS □ NH	□ кү □ nj	☐ LA ☐ NM	☐ ME ☐ NY	☐ MD ☐ NC	☐ MA ☐ ND	∏ мі □ он	☐ MN ☐ OK	☐ MS ☐ OR	☐ MO ☐ PA
		□ sc			□ TX	UT	U VT	□ VA	□ WA		□ wi	□ WY	□ PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	
1.	sold box	er the aggregate offering price of securities included in this offering and the total amount already . Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this and indicate in the columns below the amounts of the securities offered for exchange and ady exchanged.		
	Typ	e of Security	Aggregate Offering Price	Amount Already Sold
		t	\$	\$
		ity	\$	s
	~4"	☐ Common ☐ Preferred	<u> </u>	<u> </u>
	Con	vertible Securities (including warrants)	\$	\$·
		nership Interests	\$12,900,000	\$12,900,000
	Othe	er (Specify:)	\$	\$
		Total	\$12,900,000	\$12,900,000
		Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	+ <u>==1>001000</u>
2.	offe the	or the number of accredited and non-accredited investors who have purchased securities in this ring and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate number of persons who have purchased securities and the aggregate dollar amount of their chases on the total lines. Enter "0" if answer is "none" or "zero."		
			Number Investors	Aggregate Dollar Amount of Purchases
	Acc	redited Investors	25	\$12,900,000
	Non	-accredited Investors	0	\$ <u> </u>
		Total (for filings under Rule 504 only)		\$
		Answer also in Appendix, Column 4, if filing under ULOE.		
3.	secu prio	his filing is for an offering under Rule 504 or 505, enter the information requested for all critics sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months r to the first sale of the securities in this offering. Classify securities by type listed in Part C - stion 1.	Tour	Dellas Asissas
	Тур	e of offering	Type of Security	Dollar Amount Sold
	Rule	505		\$
	Reg	ulation A		\$
	Rule	2 504		\$
		Total		\$
4.	a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
		Transfer Agent's Fees.		☐ \$
		Printing and Engraving Costs		⊠ \$ <u>16,200</u>
		Legal Fees		⊠ \$ <u>40,000</u>
		Accounting Fees		⊠ \$ <u>12,000</u>
		Engineering Fees		\$
		Sales Commissions (specify finders' fees separately)		\$
		Other Expenses (identify): Business license and registration		⊠ \$ <u>300</u>
		Total		⊠ \$ <u>68,500</u>

	and total expenses furnished in respon	egate offering price given in response to Part C - Question 1 use to Part C - Question 4.a. This difference is the "adjusted"		\$ <u>12,831,500</u>			
5.	for each of the purposes shown. If the a and check the box to the left of the est	d gross proceeds to the issuer used or proposed to be used amount for any purpose is not known, furnish an estimate timate. The total of the payments listed must equal the orth set forth in response to Part C - Question 4.b above.					
			Payments to Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees		\$	⊠ \$ <u>1,026,520</u> ¹			
	Purchase of real estate		\$	⋈ \$ <u>12,831,500</u>			
	Purchase, rental or leasing and installation of	f machinery and equipment	□ \$	□ \$			
	· · · · · · · · · · · · · · · · · · ·	nd facilities	□ \$				
	Acquisition of other businesses (including t	the value of securities involved in this offering that curities of another issuer pursuant to a merger)	□ \$	□ \$			
	Repayment of indebtedness		□ \$	□ s			
	Working capital		□ \$	□ \$			
	- -						
	Cart (optimity)						
			□ 1 ¢	□ \$			
			<u> </u>				
	Column Totals	□ \$	⊠ \$ <u>13,858,020</u>				
	Total Payments Listed (column totals added)						
		D. FEDERAL SIGNATURE					
con		gned by the undersigned duly authorized person. If this notion to the U.S. Securities and Exchange Commission, upon written paragraph (b)(2) of Rule 502.					
	uer (Print or Type)	Signature	Date				
	orrison Street Fund I, L.P., Delaware limited partnership	Mr. II	May 28, 2004				
	me of Signer (Print or Type)	Title of Signer (Print or Type)					
D.	and C. Crossom	By: NBS Funding, LLC, an Oregon limited l		neral Partner			
Ka	ance S. Gregory	By: Rance S. Gregory, Chief Executive Offi	<u>cer</u>				
	٠.						
		ATTENTION					
	Intentional misstatements of	r amissions of fact constitute federal eviminal vi	alations (Cas 10 TI C	C 1001 \			

¹ <u>NOTE</u>: Management fees of \$256,630 per year are payable in addition to the \$12,831,500 capital commitment. This estimate assumes a period of four years.